

Nadler Opposes Closure of VA Hospitals in Brooklyn and Manhattan

Sunday, 18 September 2005

WASHINGTON, D.C. – Congressman Jerrold Nadler (D-NY) today testified before the Department of Veterans’ Affairs CARES (Capital Asset Realignment for Enhanced Services) Commission, opposing any closures within the New York Harbor Medical System, which comprises two facilities in Brooklyn and Manhattan.

The CARES Commission, which is charged with “modernizing” the VA medical system, is considering various actions to reduce medical services for veterans in the New York area, including closing one of the two facilities in the system or consolidating particular services at one hospital or the other. Because many veterans are disabled and have only limited access to transportation, and because traveling long distances through New York City is particularly untenable for those with limited mobility, Congressman Nadler opposes any reduction or concentration of medical services.

Congressman Nadler stressed these points in today’s testimony. The text of his remarks follows.

STATEMENT TO

THE LOCAL ADVISORY PANEL TO THE

CAPITAL ASSET REALIGNMENT FOR ENHANCED SERVICES (CARES) COMMISSION

SEPTEMBER 19, 2005

Mr. Chairman and Members of the Local Advisory Panel, thank you for the opportunity to testify before you here today. Since this panel was last convened, several options have been proposed to address the problems facing the New York Harbor Healthcare System. I believe that upgrading both the Manhattan and Brooklyn facilities, and the network of Community Based Outpatient Centers, is the best option to serve the needs of our local veterans.

The New York Harbor Healthcare System serves an essential role in the care of our veterans. The Medical Centers serve veterans within a 100 square mile radius, including patients from as far away as Pennsylvania. Changing the current veterans healthcare system would have far-reaching, damaging consequences for veterans in the region.

The CARES Commission is charged with formulating a plan to provide current and future veterans with healthcare equal to or better than that which they currently receive in terms of access, quality, and cost. Let’s take a look at all three.

Access is perhaps the strongest argument for not changing the way the system works now. Even today, with New York City being so densely populated, and so congested with traffic, it is often difficult for Veterans to get to the Medical Centers. And the typical approach to calculating drive times to and from the hospitals simply do not apply in New York, as anyone who has been stuck in traffic generated by the UN General Assembly last week can attest to.

I would urge this panel to take an extremely careful and detailed look at the peculiarities of New York’s traffic patterns and mass transit options before acting.

With careful consideration you will find that closing or moving either Medical Center would only make matters worse. Because many veterans are already stricken with mobility issues, forcing them to travel greater distances, possibly without the aid of several public transportation options, would be a callous choice.

With respect to quality of care, I am sure this panel is well aware that the New York Harbor healthcare system is the home of six centers of excellence, as well as the only prosthetics center in the northeast. The cardiac surgery program at the Manhattan medical center has been judged by the VA as having the best outcomes in their national system. They have enjoyed a close working relationship with NYU Medical school for over 50 years. Countless residents have trained in both VA medical centers.

With respect to cost, I would like to stress the question of need. I understand that studies show a reduction in demand over the next 20 years. However, the notion that somehow either the Manhattan or Brooklyn VA Medical Centers will see a reduction in need strikes me as incomprehensible. There are 1.3 million Veterans living in the New York Metropolitan area today, and both facilities are being fully utilized.

With the increase in the number of active duty National Guardsmen and Reservists now serving in Iraq, who have or will become eligible for veteran's healthcare benefits, both facilities will undoubtedly see an increase in demand in the years to come. It is my understanding that over 2,000 veterans from the conflicts in Afghanistan and Iraq have already registered with the New York Harbor healthcare system. Reducing the access to and quality of healthcare while our troops are fighting in the Middle East is completely immoral.

It is my understanding that New York University and SUNY Downstate Medical Centers have come together to endorse a combination of options one, six, and seven. I commend them for their willingness to work with the CARES commission in an open and positive fashion. I understand that a partial consolidation of services has already occurred, but I am opposed to a complete consolidation of services in either facility. This is for the simple reason that, if some services were moved to just the Brooklyn campus, and some to the Manhattan hospital, we would be inhibiting access to care.

The decision this panel makes will have profound consequences for thousands of veterans in the region. Because of the particulars of life in New York, I would urge this panel to pay especially close attention to the input of the local community, and especially to those who know our veterans best. New York's veterans receive a high level of care that could be jeopardized; I would therefore encourage you to be extremely deliberative, and extremely cautious. After all they have sacrificed for our country, we should not be putting obstacles in the way of our veterans getting the care they have earned. Thank you for the opportunity to testify before you here today."

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